Date Submitted:       Fiscal Year:

Check Number:       \_\_\_\_\_\_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Completed By:       \_\_\_\_\_\_\_\_\_\_ CUPA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **SURCHARGE TRANSMITTAL REPORT**27 CCR §15250 |
|  | Total Amount of Surcharge Remitted |
| CUPA OVERSIGHT |       |
| Electronic Reporting |       |
| UNDERGROUND STORAGE TANKS |       |
| CALARP |       |
| TOTAL |       |

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| This Surcharge Transmittal Report, or a copy thereof, OR a substantially equivalent report shall be completed and submitted to the Secretary as a cover document each time surcharge revenues are remitted. Please staple the remittance check to this form when submitting surcharge revenues. |